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IN THE COURT OF APPEAL OF THE STATE OF CALIFORNIA

SECOND APPELLATE DISTRICT

DIVISION EIGHT

In re J.A., a Person Coming  
Under the Juvenile Court Law.

LOS ANGELES COUNTY  
DEPARTMENT OF CHILDREN  
AND FAMILY SERVICES,

Plaintiff and Respondent,

v.

P.E.

Defendant and Appellant.

B288653

(Los Angeles County  
Super. Ct. No.  
17CCJP01738)

APPEAL from an order of the Superior Court of Los Angeles County, Julie Fox Blackshaw, Judge. Affirmed.

Donna Balderston Kaiser, under appointment by the Court of Appeal, for Defendant and Appellant.

Mary C. Wickham, County Counsel, Kristine P. Miles, Assistant County Counsel, and Stephanie Jo Reagan, Principal Deputy County Counsel, for Plaintiff and Respondent.

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## INTRODUCTION

Father consented to the release of his mental health records to the Los Angeles County Department of Children and Family Services (DCFS). DCFS received and reviewed Father's mental health records and, months later, Father revoked his consent. Nonetheless, DCFS included information obtained from the records in reports it prepared and submitted to the juvenile court. Father appeals from the jurisdictional and dispositional findings and order of the juvenile court pursuant to sections 300 and 361 of the Welfare and Institutions Code<sup>1</sup> regarding his minor child, J.A, currently age 15. Father contends revocation of the consent he had given to DCFS precluded the juvenile court from admitting the information contained in his mental health records. Father also contends substantial evidence does not support the juvenile court's jurisdictional findings "either with or without the wrongly admitted mental health information." We disagree with Father's contentions and affirm.

## FACTUAL AND PROCEDURAL BACKGROUND

### A. *Referral and DCFS's Investigation*

On July 27, 2017, DCFS received a referral "alleging emotional abuse and general neglect" by Father of his minor son, J.A. The referral alleged that a few days earlier—on July 24, 2017—Father had gone to the County Board of Supervisors' offices because he believed he was "a victim of identity theft when

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<sup>1</sup> All further statutory references are to the Welfare and Institutions Code unless otherwise indicated.

an acquaintance got his personal information from social media.”<sup>2</sup> Father was incoherent, displayed paranoia, and stated he kept knives under his bed to protect himself and his son. According to the reporting party, Father had stopped coming to work on July 14, 2017, except for July 20, 2017 when Father “came into work for about [30] minutes to file an affidavit” about the alleged identity theft. He appeared “paranoid” and exhibited “rapid speech.”

On July 28, 2017, a DCFS social worker spoke with Father by telephone and informed him “there was an open child abuse investigation.” The social worker later met with Father in person; Father was “coherent,” “spoke at a normal pace,” and “did not appear to be under the influence of any drugs or alcohol.” Father said he had anxiety but was not taking his prescribed medication because “he wants to be an ‘able body.’” He said he received counseling at Saint Mary’s and at Kaiser. He also said he had a prescription for marijuana and the last time he smoked marijuana was “about 2 weeks ago”; he denied smoking marijuana in front of J.A. He admitted to a past incident of domestic violence, but said he was no longer in a relationship with that person. Father also explained that he has a cognitive learning disability, causing him to learn “two times slower than the average person”; thus, it takes him “two times [as long] to complete a task.”

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<sup>2</sup> Father believed his former boyfriend was hacking him and attempting to steal his identity. Father unsuccessfully sought an emergency protective order against his former boyfriend. Father said his Google, Sony, PlayStation, T-Mobile, and Verizon accounts were hacked, and that a “warning message popped up” on his TV from the FBI.

When asked whether he would submit to an on-demand drug test as he said he used marijuana, Father indicated he would. Father denied keeping any knives under his bed, but admitted to “carr[ying] scissors on his body . . . just in case he needs to use them for cutting.”

DCFS privately interviewed Father’s son, J.A. J.A. had seen his father use alcohol and said Father would “get a buzz but has never tried to harm or attempt to harm [J.A.]” J.A. denied any sexual abuse and said he never witnessed domestic violence. However, J.A. stated he “has seen [F]ather paranoid multiple times” and that Father sometimes “becomes emotional.”

Father missed the agreed-upon scheduled drug test. He told the social worker he would agree to test but only at his medical facility because he “question[s] the ethics and procedures” of the Los Angeles County’s Sheriff’s Department. Father subsequently sent a text message to the social worker and “nullif[ied his] authorization for a drug panel screening.” He also stated his and his family’s welfare “are being compromised by [DCFS’s] frivolous inquiry” and by “the hack and stalking.”

On August 15, 2017, the social worker completed a home assessment of Father’s residence; the social worker confirmed the home was “neat and clean,” the “kitchen had food,” and “all utilities were in working condition.”

That same day, Father informed the social worker J.A. “may be missing”; he said that he was told by school officials J.A. left the school campus at 12:30 p.m. and “has not been seen since.” Father also informed the social worker that J.A. recently ran away from Father as a result of a disagreement. Father reported J.A. did not wake up on time to get ready for school, and by the time J.A. woke up, it was time to leave. J.A. stated he

wanted to shower, but Father told him he “no longer had enough time to shower.” J.A. told Father he would not go to school unless he could “shower and wear a clean uniform to school.” When Father turned off the shower water and stopped J.A. from showering, J.A. “socked [F]ather in the torso” and ran away. J.A. called Mother, who picked him up.<sup>3</sup>

Father said he “keeps getting harassing letters from his employer” and he “does not feel safe at work.” He said he applied for Victims of Crime, and he was a “victim of police brutality” by the Emeryville Police Department in 2013. Father said “he felt he was being discriminated against by the LAPD because of his sexual orientation and his politics against the police department.”

Mother and Father had shared custody of J.A. since February 2017. On August 15, 2017, the social worker spoke with Mother, who had “heard [that] [F]ather used drugs (cocaine) and was a prostitute” sometime in 2014, but “did not have any evidence.” Mother “suspect[ed] [Father had] mental health problems when they were dating.” She said Father had “threatened her” in the past. Mother said she did not know why Father is “always angry.” Mother reported that J.A. “does not talk much for two days” and “is different” when he comes back from Father’s home. J.A. has told Mother that Father is paranoid, “always seems nervous,” and is “always doing something on his phone.” J.A. has also reported to Mother he and his father argued a lot when they were together.

On August 21, 2017, Father was “about two hours late” picking J.A. up from school; when Father arrived, he “was yelling [and] threatening to call” law enforcement on Mother and/or

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<sup>3</sup> Mother is not a party to this appeal.

paternal grandmother. When he and J.A. started to argue, J.A. ran off. J.A. told the social worker he “does not feel comfortable around [F]ather as he acts differently, but did not elaborate” on what he meant by “differently.” The next day, on August 22, 2017, Father contacted the social worker and said J.A. told him he “does not want to come home [to Father] anymore” and he wants the family court to “change the custody agreement.” J.A. said he “loves [F]ather and wants to see [F]ather and visit him, but wants [M]other to have primary custody.”

In July 2017, Father had previously authorized—in writing—the disclosure of his mental health information and/or records to DCFS. On August 31, 2017, DCFS received a copy of Father’s outpatient initial adult diagnostic evaluation and treatment plan from Kaiser’s Department of Psychiatry, dated March 27, 2017. Father had sought help from Kaiser for anxiety, and had “significant trauma history,” a “history of major depression,” “history of polysubstance abuse,” and had “expressed concern about reliance on alcohol to help manage psychological distress and stressors.” Father admitted he “drinks 1-4 drinks per day” and “uses alcohol to medicate anxiety.” Father had “multiple suicide attempts at age 22 by over dosing [*sic*], hanging, and slitting his wrist.” Father also admitted he had “a history of cocaine use at age 31 as well as narcotics and methamphetamine at age 32-34.”

On September 5, 2017, Father messaged the social worker and said he “was released late last night” and “did not have access to his phone until he was released.” When asked where he had been held, Father did not respond. On September 14, 2017, Father attempted to file a missing person’s report about J.A. Law enforcement confirmed J.A. was in school. J.A. reported

that Father “has been making threats to hit him” and that he is “scared of” Father. He also described Father as being “more aggressive now” and said Father “might be using drugs.”

Mother requested a modification of custody order from the family court. During the hearing on September 26, 2017, the family court made no modifications “as there was an open investigation with DCFS.” J.A. stated he “would like a plan that allows him to stay with his [M]other and then, maybe, see his [F]ather on the weekend.” J.A. also reported “his grades have suffered.” Mother met with the social worker again and became emotional explaining how “[F]ather’s behavior has become very concerning” and “is having a seriously negative impact on [J.A.]”

On October 26, 2017, Father met with the social worker at DCFS’s office. Father expressed his desire to file a civil rights complaint against DCFS. Father said he wanted to be placed with J.A. “in a witness protection program” because “[J.A.]’s Gmail and [A]ndroid has [*sic*] been hacked.” Father provided the social worker with a letter from a doctor indicating Father “returned to counseling” and is “receiving one on one therapy twice a month.”

On November 7, 2017, Father e-mailed the DCFS social worker and stated: “In our meeting last week you stated that if you gained access to medical records and had a 5-panel drug screening that the Department was still going to recommend removal. If this is the case I will not test and have instructed my medical providers to not give [you] access until further notice.”

#### B. *Petition and Detention*

On November 13, 2017, DCFS filed a petition alleging J.A., then age 13, came within the jurisdiction of the juvenile court under section 300. Count (b)(1) of the petition alleged Father’s

“history of mental and emotional problems,” including his “depression, suicidal ideation, mood disorder, severe, without psychosis” and his display of “paranoia, depression, and anxiety,” rendered Father “incapable of providing [J.A.] with regular care and supervision” and—as a result—placed J.A. “at risk of serious physical harm[] and damage.” Count (b)(2) of the petition alleged Father had “a history of illicit drug abuse including cocaine, methamphetamine, marijuana and alcohol,” and that he is a “current abuser of marijuana and alcohol,” which rendered Father incapable of providing J.A. regular care and supervision, and placed J.A. “at risk of serious physical harm, and damage.”

In DCFS’s detention report, DCFS detailed its basis for recommending J.A.’s detention, included information obtained from Father’s mental health records; DCFS also included the actual records as attachments to the report.

At the detention hearing on November 14, 2017, Father objected to the “inclusion of some of his medical records in the detention report as he did not consent to the release of those records” and is “not sure how [DCFS] got those records.” The juvenile court did not rule on Father’s objection, and Father did not object to the juvenile court’s failure to make a ruling.

Minor’s counsel told the court J.A. “would like custody with Mother.” Father indicated he was willing to undergo drug testing. He then requested to make a statement on the record to the juvenile court, and said, “I used to be an employee of the U[.]S[.] congress. I was stalked and hacked by a dating relationship. I filed a police report for domestic violence. It snowballed into the L A County Sheriff not reporting it to homeland security and homeland security has now come . . . after me and made my life – it’s been an issue of police brutality.” The



court thereafter ordered J.A. detained from Father and released to “non-offending” Mother. DCFS was ordered to provide case-appropriate referrals to Father. The court ordered monitored visitation for Father, a minimum of two times per week, two hours per visit and gave DCFS discretion to liberalize Father’s visits.

C. *Jurisdiction and Disposition*

When interviewed by DCFS on December 21, 2017, Father stated, “I don’t know how [the social worker] obtained my medical records because I verified with Kaiser and they told me specifically that they never faxed over my medical records that [the social worker] included in the last report.’” Father then accused DCFS of having “obtained illegally [the mental health records] from [his] home.” Father admitted that he previously consented to the release of his medical records, “but that was at the beginning and [he] rescinded that consent . . . .”

During the jurisdictional and dispositional hearing on January 19, 2018, DCFS moved to admit into evidence its reports, including the detention report dated November 14, 2017, the jurisdiction/disposition report dated January 12, 2018, and the last minute information dated January 12, 2018. Father’s mental health records were attached to the reports and the reports themselves included excerpts from the records. Father objected to the inclusion of his medical reports and argued that he had e-mailed a rescission of his consent to release the documents. He further argued that because the records were from March 2017, they were not probative.

The juvenile court asked Father whether there was a valid consent from him at the time DCFS obtained the records. Father’s counsel stated he had seen a copy of a consent Father

had signed in July 2017, but later revoked on November 7, 2017.<sup>4</sup> The court found DCFS “did obtain documents when a valid consent was in place. There is no question about that.” The juvenile court reminded Father’s counsel that under section 355, the “statements of the social worker do come in” and “there is no hearsay objection available under . . . section 355.” “[A]t the time the social worker reviewed the records and included the information in the report, there was valid consent for [DCFS] to obtain those records, and so I do believe there is no violation of the father’s privacy rights by those records being included in the social worker’s report.”

The juvenile court continued: “As for the actual [mental health] records themselves, I’m not sure I need the actual records themselves since the social worker’s statements come in through the social worker’s report. At this point, I will not consider the actual records themselves which is the summary of them presented in the report. If the social worker did have proper access to the records pursuant to Father’s consent, I think his statements in the report do not violate any concern for privacy.” The juvenile court subsequently admitted DCFS’s reports into evidence with the exception of the actual mental health records themselves.

The court sustained count (b)(1) and stated, “There is no question that the father has suffered from emotional and mental instability in the past and that has resulted in hospitalization, erratic behavior, erratic statements, sometimes threatening

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<sup>4</sup> DCFS received the mental health records from Kaiser on August 31, 2017—after having obtained Father’s written consent to do so sometime in July 2017, and before Father revoked and/or rescinded his consent on November 7, 2017.

statements, sometimes statements indicating paranoia. And the relationship to the minor is that the minor has been frightened in the father's company." J.A. "was concerned something was wrong with the father" and "did not feel safe"; J.A. "fe[lt] frightened" because there were knives in Father's home. The court dismissed count (b)(2).

The court declared J.A. a dependent child of the court under section 300, subdivision (b), and ordered him removed from Father and released to the home of Mother with monitored visitation for Father. The court ordered family maintenance services for Mother and enhancement services for Father.

The court explained "jurisdiction [will remain] open in this case" because "there are still several areas of concern and risk." The court commended Father for being "on the path to sobriety and stability, but . . . believe[d] that there is still . . . work to be done" and wanted the case to remain open "to ensure that that happens."

#### D. *Post-Disposition Events*

On February 28, 2018, Father filed a notice of appeal.

On August 16, 2018, while this appeal was pending, the juvenile court terminated jurisdiction with a juvenile court custody order granting joint legal custody of J.A. to Mother and Father, sole physical custody to Mother, and unmonitored visitation for Father.<sup>5</sup>

On March 20, 2019, Father and DCFS were advised pursuant to Government Code section 68081 that we were

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<sup>5</sup> We granted Father's request to take judicial notice of the juvenile court's July 27, 2018 and August 16, 2018 orders, which terminated its dependency jurisdiction with custodial and visitation exit orders.

considering whether to dismiss the appeal as moot, given the juvenile court's July 27, 2018 and August 16, 2018 orders. Both parties submitted letter briefs on the issue, which we have reviewed.

## DISCUSSION

Father's appeal is not moot. Father contends rescission of the consent he gave to DCFS precluded the juvenile court from admitting and relying upon the information contained in his mental health records. Father also contends substantial evidence does not support the juvenile court's jurisdictional finding. For reasons explained below, we disagree with Father's contentions, and affirm.

### A. *Father's Pending Appeal is Justiciable.*

"As a general rule, an order terminating juvenile court jurisdiction renders an appeal from a previous order in the dependency proceedings moot." (*In re C.C.* (2009) 172 Cal.App.4th 1481, 1488.) "[A]n appeal presenting only abstract or academic questions is subject to dismissal as moot." (*In re Jody R.* (1990) 218 Cal.App.3d 1615, 1621.) "A reversal in such a case would be without practical effect, and the appeal will therefore be dismissed." (*In re Dani R.* (2001) 89 Cal.App.4th 402, 404.)

However, the appellate court may find that the appeal "is not moot *if* the purported error is of such magnitude as to infect the outcome of [subsequent proceedings] *or* where the alleged defect undermines the juvenile court's initial jurisdictional finding." (*In re Joshua C.* (1994) 24 Cal.App.4th 1544, 1547, quoting *In re Kristin B.* (1986) 187 Cal.App.3d 596, 605). We may also decline dismissal of the appeal where the jurisdictional

findings could affect the parent in the future (*In re J.K.* (2009) 174 Cal.App.4th 1426, 1432; accord, *In re Daisy H.* (2011) 192 Cal.App.4th 713, 716 [An appellate court ordinarily will not dismiss as moot a parent's challenge to a jurisdictional finding if the purported error "could have severe and unfair consequences to [the parent] in future family law or dependency proceedings."]), or where review is necessary because the issue rendered moot by subsequent events is of continuing public importance and is a question capable of repetition, yet evading review. (*In re Anna S.* (2010) 180 Cal.App.4th 1489, 1498.)

"We decide on a case-by-case basis whether subsequent events in a juvenile dependency matter make a case moot and whether our decision would affect the outcome in a subsequent proceeding." (*In re Yvonne W.* (2008) 165 Cal.App.4th 1394, 1404; *In re Kristin B., supra*, 187 Cal.App.3d at p. 605.)

In this case, Father contends the juvenile court's exit order granting him unmonitored visitation did "not restore [F]ather to the position he was in at the beginning of the case," as he had joint custody of J.A. prior to the juvenile court's asserting dependency jurisdiction over J.A. Father argues that he "continues to be prejudiced by" the juvenile court's April 19, 2018 finding "because in subsequent family court proceedings[,] [Father] will carry the burden in efforts to regain joint custody." Father contends that the juvenile court's finding as to Father's "mental health problems" and how they "endangered his child and required the removal of the child from his custody" may prejudice him in subsequent juvenile and/or family law proceedings.

Although Father did not articulate and/or specify *how* the jurisdictional finding he challenges could adversely affect future

dependency or family law proceedings, in an abundance of caution and based on the following factors, we consider the merits of his appeal. First, J.A. is currently 15 years old and will remain a minor for the next three years; it is possible there may be future actions regarding J.A.—either in the dependency or family law context—until he reaches the age of majority. Second, the record before us provides us with proof of ongoing litigation or custody disputes between Father and Mother in the family law court, and thus, it is plausible Mother or the family law court may rely on the juvenile court’s finding in making future custody or visitation orders; thus, prejudice in subsequent family law proceedings is, in fact, possible, rendering Father’s appeal justiciable.

B. *Father’s Motion to Strike and to Seal Mental Health Records are Denied.*

Before we discuss Father’s claims, we address his motion to: 1) strike his mental health records from the appellate record, 2) strike portions of DCFS’s reports that contain information obtained from Father’s mental health records, and 3) seal Father’s mental health records in the juvenile court file.

Evidence Code section 1014 provides that a patient has a privilege to refuse to disclose, and to prevent another from disclosing, confidential communication between the patient and his or her psychotherapist. “Confidential communication” means “information . . . transmitted between a patient and his psychotherapist in the course of that relationship and *in confidence by a means which, so far as the patient is aware, discloses the information to no third persons other than those who are present to further the interest of the patient in the consultation*, or those to whom disclosure is reasonably necessary

for the transmission of the information or the accomplishment of the purpose for which the psychotherapist is consulted, and includes a diagnosis made and the advice given by the psychotherapist in the course of that relationship.” (Evid. Code, § 1012, italics added.) “It has been recognized that the intimate and sensitive nature of the communications called for by [the psychotherapist-patient] relationship implicate constitutional as well as statutory rights of privacy.” (*Simek v. Superior Court* (1981) 117 Cal.App.3d 169, 177.)

This privilege, however, is not absolute. The psychotherapist-patient privilege may be waived by the patient’s voluntary disclosure of confidential information. (See Evid. Code, §§ 912, subd. (a), 1016; *Roberts v. Superior Court* (1973) 9 Cal.3d 330, 340.) The holder of the psychotherapist-patient privilege waives it with respect to a communication if, “without coercion, [he or she] has disclosed a significant part of the communication or has *consented to disclosure* made by anyone.” (Evid. Code, § 912, subd. (a), italics added.) “Consent to disclosure is manifested by any statement or other conduct of the holder of the privilege indicating consent to the disclosure, including failure to claim the privilege in any proceeding in which the holder has legal standing and the opportunity to claim the privilege.” (*Ibid.*)

“[W]aiver of an important right must be a voluntary and knowing act done with sufficient awareness of the relevant circumstances and likely consequences.” (*Roberts v. Superior Court, supra*, 9 Cal.3d at p. 343.) “‘[T]he psychotherapist-patient privilege is to be liberally construed in favor of the patient.’” (*People v. Wharton* (1991) 53 Cal.3d 522, 554, quoting *Roberts v. Superior Court, supra*, at p. 337.) Courts presume communications made in confidence to a psychotherapist are

privileged, and the opponent of the privilege bears the burden of proving waiver. (Evid. Code, § 917, subd. (a).)

DCFS contends Father waived the privilege because he authorized Kaiser to disclose his mental health information to DCFS. DCFS argues that Father did not have an “objectively reasonable expectation of privacy” in the mental health records released to DCFS because Father consented to the release of said information and/or records after being informed by DCFS that there is an open investigation.

We find Father’s written consent to the dissemination of his mental health records to DCFS is a waiver of his right to privacy and the psychotherapist-patient privilege with respect to those records. The mental health records were disclosed by Kaiser to DCFS on August 31, 2017, a month after Father provided his consent for their release and three months before Father rescinded his consent; thus, the records at issue were properly obtained by DCFS, and Father had no right to privacy for information disclosed pursuant to his valid consent.

Father acknowledges he “previously wanted the social worker to understand why he was in counseling and had agreed to release his records,” but that he thereafter “changed his mind on November 7, 2017.” Additionally, Father submitted to the juvenile court a letter from a doctor that indicated he “returned to counseling” and is “receiving one on one therapy twice a month.” We believe by trying to enter into evidence a letter written by a medical professional that purports to provide an update on Father’s mental health, Father—once again—tendered the issue of his mental condition so as to waive the protection of the psychotherapist-patient privilege.

Based on the foregoing, we deny each of Father’s motions.



C. *The Juvenile Court Did Not Err in Admitting Information Obtained from Father's Mental Health Records.*

We review the juvenile court's decision to admit or exclude evidence for abuse of discretion. (*In re Cole C.* (2009) 174 Cal.App.4th 900, 911.) The appropriate test for abuse of discretion is whether the trial court exceeded the bounds of reason. (*Ibid.*)

Based on the analysis set out *ante*, we find the juvenile court did not abuse its discretion in admitting the DCFS reports that included information obtained from the Kaiser mental health reports. The mental health information proved valuable to the juvenile court in making its jurisdictional and dispositional findings and orders. We cannot find the juvenile court's decision arbitrary or capricious.

D. *Substantial Evidence Supports the Juvenile Court's Jurisdictional Findings.*

In reviewing a challenge to the sufficiency of the evidence supporting jurisdictional findings and related dispositional orders, we "consider the entire record to determine whether substantial evidence supports the juvenile court's findings." (*In re T.V.* (2013) 217 Cal.App.4th 126, 133; accord, *In re I.J.* (2013) 56 Cal.4th 766, 773.) "Substantial evidence is evidence that is 'reasonable, credible, and of solid value'; such that a reasonable trier of fact could make such findings. [Citation.]" (*In re Sheila B.* (1993) 19 Cal.App.4th 187, 199.)

In making our determination whether substantial evidence supports the jurisdictional findings, " "we draw all reasonable inferences from the evidence to support the findings and orders of the dependency court; we review the record in the light most favorable to the court's determinations; and we note that issues

of fact and credibility are the province of the trial court.”  
[Citation.] “We do not reweigh the evidence or exercise independent judgment, but merely determine if there are sufficient facts to support the findings of the trial court.” ’ ’ ( *In re I.J.*, *supra*, 56 Cal.4th at p. 773; see *In re Alexis E.* (2009) 171 Cal.App.4th 438, 451.)

Section 300, subdivision (b)(1), authorizes a juvenile court to exercise dependency jurisdiction over a child if the “child has suffered, or there is a substantial risk that the child will suffer, serious physical harm or illness, as a result of the failure or inability of his or her parent . . . to adequately supervise or protect the child, or . . . by the inability of the parent . . . to provide regular care for the child due to the parent’s . . . mental illness, developmental disability, or substance abuse.” (§ 300, subd. (b)(1).) A jurisdictional finding under section 300, subdivision (b)(1), requires DCFS to demonstrate the following three elements by a preponderance of the evidence: (1) neglectful conduct, failure, or inability by the parent; (2) causation; and (3) serious physical harm or illness or a substantial risk of serious physical harm or illness. (*In re Joaquin C.* (2017) 15 Cal.App.5th 537, 561; see also *In re R.T.* (2017) 3 Cal.5th 622, 624.) The court need not wait until a child is seriously harmed or injured to assume jurisdiction and take the steps necessary to protect the child, as the focus of the statute is on averting harm to the child. (*In re Diamond H.* (2000) 82 Cal.App.4th 1127, 1136, disapproved on other grounds in *Renee J. v. Superior Court* (2001) 26 Cal.4th 735, 749.)

Here, Father contends the evidence is insufficient to support the juvenile court’s jurisdictional finding under section

300, subdivision (b), “either with or without the wrongly admitted mental health information.” We disagree.

The record reflects multiple reports of Father’s paranoia-- and that he was incoherent, displayed rapid speech, failed to go to work for long periods of time, and admitted keeping knives under his bed to protect himself and J.A. from individuals and entities he believed were after him and/or his family. Father had “significant trauma history,” a “history of major depression,” “history of polysubstance abuse,” and had “expressed concern about reliance on alcohol to help manage psychological distress and stressors.” Father admitted he “drinks 1-4 drinks per day” and “uses alcohol to medicate anxiety.” Father also admitted he had “a history of cocaine use at age 31 as well as narcotics and methamphetamine at age 32-34.” Despite this, he missed scheduled drug tests he had agreed to take. Although Father had been prescribed medication for his anxiety, he refused to take it.

J.A. reported being “scared of” Father, whom he described as being “more aggressive now,” and stated that he believes Father “might be using drugs” and that he did “not feel comfortable around [F]ather.” J.A. also ran away from Father while in his custody, was threatened by Father, and wrote a letter to the family court begging the court to award his Mother primary custody with visitation rights for Father. J.A.’s grades had suffered while he was in his Father’s custody, and Father’s behavior continued to “hav[e] a seriously negative impact on [J.A.]” There is substantial evidence in this record that Father’s current mental state is interfering with his ability to provide a safe and secure home for J.A. and as a result J.A. is at risk of future physical harm while Father cannot manage his illness and paranoia.

Based on the foregoing and a review of the entire record before us, we believe the juvenile court's jurisdictional finding is supported by substantial evidence.

**DISPOSITION**

The juvenile court's jurisdictional findings and the order made January 19, 2018 are affirmed. Father's motions are denied.

**NOT TO BE PUBLISHED IN THE OFFICIAL REPORTS**

STRATTON, J.

We concur:

BIGELOW, P. J.

GRIMES, J.